# INSTRUCTIONS FOR COMPLETING THE ARKANSAS MARRIAGE & FAMILY THERAPY LICENSE

## **Application for Marriage & Family Therapy License**

Please supply all information requested on the *Application for Marriage & Family License* form. Complete each line and include both your office and residence phone numbers. Type in "N/A" if the information requested does not apply to you. List all professional work experience and professional training, including degrees earned and the relevant dates, along with a description of other valid professional licenses or certificates for which you have qualified. The *Affidavit of Residency*, included at the end of the form, must be signed and witnessed by a notary public.

## **Core Curriculum Sheet**

The Core Curriculum Summary refers to graduate course content area requirements every applicant for licensure must satisfy. Before filling out the Summary, please refer to the relevant descriptions of the core content areas. (abstracted pages 17-18 of *The American Association for Marriage & Family Therapy [AAMFT]*.

Utilizing the AAMFT descriptions as guidelines, please supply the number and title (as they appear on your official transcript of graduate work completed) of each course you wish to reference in documenting how your professional academic preparation fulfill content area requirements. More than one course may be listed to exhibit coverage of a given area.

In some instances, if questions arise, the Board may require a copy of a course description from a graduate catalog or a verification statement from an appropriate university official confirming that the course in question may be cited as fulfilling the area requirement.

#### Effective January 1, 2003

60 Graduate hours, acceptable to the Board are required for an application for an Arkansas Counseling License or Marriage and Family Therapist License to be processed. The core curriculum courses mandated January 1, 2005 must be documented by transcript. The additional courses must be counseling in nature and related to the degree approved by the applicant's university program.

## **Statement of Professional Intent**

Please attach to your *Application for Marriage & Family Therapy License* form a **type-written** or **word-processed** *Statement of Professional Intent* on the enclosed form. Your statement should outline briefly the general nature of the work in which you expect to engage as a professional therapist. You must include a succinct summary of the methods, techniques and theoretical approaches you anticipate utilizing, and the populations you aspire to serve.

If you already hold any recognized credentials for one or more specializations, you should so state and include photocopies of any certificates or licenses so held.

Your *Statement of Professional Intent* will serve to define to the Board and to the citizens of the state of Arkansas the professional role you intend to assume as a licensed therapist. The document will be held on file and may be subject to scrutiny and review at any time in the future, should questions about your professional performance arise. Your *Statement* may be revised and updated when you obtain additional credentials or complete training which qualifies you for a recognized specialization. Selected specialization's are recognized when other state boards or national professional organizations have issued credentials which meet standards and guidelines acceptable to the board.

#### **Letters of Recommendation**

You are required as an applicant to furnish a minimum of <u>three</u> (3) recommendations in support of your licensure application. Two (2) should be supplied by persons who can attest to your professional training and/or competence. At least one (1) should be a non-academic character reference.

Please instruct each person you select to complete the enclosed recommendation form and mail it *directly* to the Board.

(Current board members, relatives of the applicant and clients may not submit recommendations, recent graduates are encouraged to submit at least one recommendation from a therapist educator familiar with the applicant's academic performance.)

## **Documentation of Supervised Professional Experience**

Documentation of *three* (3) or more years of supervised professional experience at the post-master's level is required for eligibility to become a Licensed Marriage & Family Therapist. Candidates with less than three years of documented post-master's supervised experience may qualify for the status of Licensed Associate Marriage & Family Therapist (see below, "Licensure Approval.")

Supervised practica and internships completed to satisfy part of the requirements for a master's degree may <u>not</u> be included. However, advanced preparation (post-master's course work) in counseling may contribute to the minimum number of years of supervised professional experience: thirty (30) credit hours of counseling-related courses may be substituted for one year of supervised experience, up to a maximum of two year's credit. Appropriate individual graduate courses may be credited on a pro-rated basis.

## **Submission of Application materials**

Application materials, as described above, should be submitted for Board consideration as a single package, at one time, and must include (1) the <u>Application for Marriage & Family</u>

<u>Therapist License</u>; (2) <u>the Core Curriculum Sheet</u>; (3) <u>the Statement of Professional Intent</u>; (4) and Documentation of Supervised Professional Experience.

Your application will not be considered complete until all necessary, supporting documents, including the three (3) recommendations and official transcripts, have been received.

In addition, you are required to have an official copy of your graduate transcript(s) sent directly from the institution(s) you have attended. Transcripts must be sent directly by the college or university where the course work was completed; photocopies or fax copies of these documents supplied by an applicant are <u>not</u> acceptable.

Please do not submit transcripts and recommendations until your application has been mailed to the board.

An application fee of \$200.00 must be tendered with the application materials (effective 2/1/97). Your check should be payable to **Arkansas Board of Examiners in Counseling.** Applicants are strongly encouraged to retain copies of all documents submitted.

Upon receipt of the application documents and fee described above, together with the supporting letters of recommendation and transcript records, the Board will review the materials supplied, usually at the next scheduled meeting subsequent to the receipt of an application. If all eligibility requirements have been satisfied, the Board will extend an invitation for you to sit for the next scheduled written examination.

#### The Marriage and Family Therapy Examination

The Marriage and Family Therapy examination is scheduled three (3) times a year. The national Professional Exam Services (PES) sets the examination schedule. The dates are included in the \$20.00 application packet from the Board, or they can be downloaded off the internet at <a href="https://www.state.ar.us/abec">www.state.ar.us/abec</a> free of charge.

The examination, electronically administered, covers essential elements of the common core areas as described in the AAMFT Curriculum Guidelines.

Admission to the PES exam requires: 1.) the exam application and fee be received by PES by their posted deadline; 2.) the license application must be received by the Board office one (1) month prior to that date.

Applicants enrolled in his or her final term must provide a letter from an academic advisor, registrar, or department chair attesting that all degree requirements will be met by the end of the current term of enrollment. The letter should list all courses currently being completed.

# **Oral Examination**

The oral examination is usually scheduled for the first Board meeting subsequent to the applicant's having achieved a passing score on the most recent written examination and approval of the applicant's therapy tape. Applicants will be notified of the time and place for the oral examination.

#### **Criminal Background Check**

See Rules/Regulations for instruction to complete the requirement. (ACT 1317 of 1997)

## **Licensure Approval**

The Marriage & Family Therapist License is granted upon successful completion of the oral examination. The status of "Associate Marriage & Family Therapist" may be conferred upon an applicant with less than three years of advanced-level supervised experience if all other requirements have been met. Prior to receipt of the license, the applicant will be supplied with a list of Board-approved supervisors and a copy of a blank supervision agreement. The applicant must obtain (1) Board approval of a supervision agreement with a Board-approved supervisor, (2) mail the signed supervision agreement to the Arkansas Board of Examiners in Counseling (Fax copies will not be accepted), and (3) pay the initial licensing fee. The biennial licensure renewal notice and licensure fee will be mailed to you the first of April. All license renewals are based on the fiscal year: July 1<sup>st</sup> each two years.

## ALL FORMS AND SUPPORTING CREDENTIALS SHOULD BE SUBMITTED TO:

Arkansas Board of Examiners in Counseling P.O. BOX 70 Magnolia, AR 71754-0070 (870) 901-7055

The applicant is responsible for keeping the Board informed of any change in address.